

Florida, and thereby indirectly acquire Citizens Bank of Marianna, Marianna, Florida, and Gladsen State Bank, Chattahoochee, Florida.

**B. Federal Reserve Bank of Chicago** (Philip Jackson, Applications Officer) 230 South LaSalle Street, Chicago, Illinois 60690-1413:

1. *Pilot Grove Savings Bank Employee Stock Ownership Plan*, Pilot Grove, Iowa; to acquire 1.82 percent of the voting shares of Pilot Bancorp, Inc., Pilot Grove, Iowa, and thereby indirectly acquire Pilot Grove Savings Bank, Pilot Grove, Iowa.

Board of Governors of the Federal Reserve System, June 24, 1998.

**Robert deV. Frierson,**

*Associate Secretary of the Board.*

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## FEDERAL RESERVE SYSTEM

### Formations of, Acquisitions by, and Mergers of Bank Holding Companies; Correction

This notice corrects a notice (FR Doc. 98-13790) published on pages 28385-28386 of the issue for Friday, May 22, 1998.

Under the Federal Reserve Bank of Richmond heading, the entry for NationsBank Corporation and NationsBank (DE) Corporation, both in Charlotte, North Carolina (collectively NationsBank), is revised to read as follows:

**A. Federal Reserve Bank of Richmond** (A. Linwood Gill III, Assistant Vice President) 701 East Byrd Street, Richmond, Virginia 23261-4528:

1. *NationsBank Corporation and NationsBank (DE) Corporation*, both in Charlotte, North Carolina (collectively, NationsBank); to merge with BankAmerica Corporation, San Francisco, California (BankAmerica), and thereby acquire the following bank subsidiaries of BankAmerica: Bank of America National Trust and Savings Association, San Francisco, California; Bank of America Texas, National Association, Dallas, Texas; Bank of America National Association, Phoenix, Arizona; and Bank of America Community Development Bank, Walnut Creek, California. On consummation of the proposed transaction, NationsBank would be renamed BankAmerica Corporation. NationsBank may form one or more intermediate bank holding companies.

In connection with the proposed transaction, NationsBank has provided notice to acquire all of the nonbank subsidiaries of BankAmerica and to

engage, directly or indirectly through such nonbank subsidiaries, in a variety of nonbanking activities that previously have been determined to be permissible for bank holding companies.

NationsBank also would continue to control all of its existing bank and nonbank subsidiaries.

The comment period on this application has been extended. Comments on this application must be received by July 9, 1998.

Board of Governors of the Federal Reserve System, June 24, 1998.

**Robert deV. Frierson,**

*Associate Secretary of the Board.*

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## DEPARTMENT OF HEALTH AND HUMAN SERVICES

### Centers for Disease Control and Prevention

[Announcement Number 98086]

### Translational Research Centers for Diabetes Control Within Managed-Care Settings; Availability of Funds for Fiscal Year 1998

#### Introduction

The Centers for Disease Control and Prevention (CDC) announces the availability of fiscal year (FY) 1998 funds, and invites cooperative agreement applications for a multi-center, collaborative, diabetes translational research initiative within managed-care settings to (1) evaluate the extent to which healthcare providers and healthcare delivery systems implement accepted standards of diabetes care (e.g., American Diabetes Association), which can reduce the burden of diabetes and its complications; (2) explore the factors that affect variations in implementing quality diabetes care; and (3) develop and test strategies aimed at closing the gap between existing practice and optimal standards of care.

The collaborative studies will consist of two phases. Phase 1 (12 months)—Planning, collaborative development of the protocol(s), and development of the manual of operations. Phase 2 (48 months)—Conduct of studies selected by the Steering Committee, analysis, and reporting of the results.

Under a Request for Contract, FY 1998 funds will be made available to fund one Data Coordinating Center (DCC). The organization funded for the DCC will not be eligible to receive funds under this Program Announcement. The DCC will collaborate with the recipients

under this announcement in the design and writing of the study protocol(s) and consent forms, creation of the data collection forms, and writing of the manual(s) of operations. In addition, it will assist with the development of the operational plans, develop a system to collect, manage, and store scientific data, management and analysis, and collaborate with the Translational Research Centers in reporting of results.

CDC is committed to achieving the health promotion and disease prevention objectives of Healthy People 2000, a national activity to reduce morbidity and mortality and improve the quality of life. This announcement is related to the priority area of Diabetes and Chronic Disabling Conditions. (For ordering a copy of Healthy People 2000, see the section Where to Obtain Additional Information.)

#### Authority

This program is authorized under sections 301(a) and 317(k)(2) of the Public Health Service Act, as amended (42 U.S.C. 241(a) and 247b (k)(2)). Applicable program regulations are found in 42 CFR Part 51b—Project Grants for Preventive Health Services.

#### Smoke-Free Workplace

CDC strongly encourages all grant recipients to provide a smoke-free workplace and to promote the non-use of all tobacco products, and Pub. L. 103-227, the Pro-Children Act of 1994, prohibits smoking in certain facilities that receive Federal funds in which education, library, child care, health care, and early childhood development services are provided to children.

#### Eligible Applicants

Eligible applicants are public and private nonprofit domestic organizations operating within managed-care settings and providing services to a minimum of 5,000 people with diabetes. Thus, managed-care organizations, teaching hospitals, universities, colleges, and research institutions are eligible to apply. Applicants claiming nonprofit status must include evidence of nonprofit status with their application.

Minority individuals and women are encouraged to apply as Principal Investigators. Institutions caring for large numbers of racial and ethnic minority groups with diabetes are especially encouraged to apply.

**Funding Preference:** A funding preference will be given to applications under the following conditions: Women, racial, and ethnic minority populations to be accessed by the applicant—to ensure that the selected Diabetes